

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000105368

Entity Name: SKY BUSINESS CORP.

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

18081 BISCAYNE BLVD
PH3
AVENTURA, FL 33160 US

New Principal Place of Business:

Current Mailing Address:

25 SE 2 AVE
410
MIAMI, FL 33131 US

New Mailing Address:

FEI Number: 65-1149542 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAKA, RICARDO S
18081 BISCAYNE BLVD
PH3
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

VEGA, JOSE M
25 SE 2 AVE
410
MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOSE M VEGA

06/25/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NAKA, RICARDO S
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

Title: SD () Delete
Name: DE NAKA, SUSANA D
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

Title: DT () Delete
Name: NAKA, MATIAS D
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

Title: D (X) Delete
Name: NAKA, HERNAN F
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: NAKA, MATIAS S
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: NAKA, HERNAN F
Address: 18081 BISCAYNE BLVD PH3
City-St-Zip: AVENTURA, FL 33160 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATIAS NAKA

P

06/25/2009

Electronic Signature of Signing Officer or Director

Date